

PLUMBING APPLICATION

PROPERTY ADDRESS

Town or Plantation Lamoine
 Street or Subdivision Lot # 483 Lamoine Beach Rd.

PROPERTY OWNER(S) NAME

Last: Apel First: Ray
 Applicant Name: Bon M. McGlashan
 Mailing Address of Owner/Applicant (if Different) 439 Lamoine Beach Rd Lamoine, ME 04605

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector(s) to deny a permit.

[Signature] 1-21-14
 Signature of Owner/Applicant Date

Department of Health and Human Services
 Division of Environmental Health

Town/City LAMOINE Permit # 1755
 Date Permit Issued 1/21/14 Fee: \$ _____ Double Fee Charged []
[Signature] L.P.I. # 1040
 Local Plumbing Inspector Signature

The Internal Plumbing Fixtures and Piping shall not be installed until a Permit is issued by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the plumbing system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules Application.

Date Approved (Rough-in)

LPI Signature

Date Approved (Final)

PERMIT INFORMATION

This Application is for

1. ☒ NEW PLUMBING
 2. ☐ RELOCATED PLUMBING

Type of Structure to be Served

1. ☒ SINGLE FAMILY RESIDENCE
 2. ☐ MODULAR OR MOBILE HOME
 3. ☐ MULTIPLE FAMILY DWELLING
 4. ☐ OTHER-SPECIFY _____

Plumbing to be Installed by:

1. ☒ MASTER PLUMBER
 2. ☐ OIL BURNERMAN
 3. ☐ MFG'D HOUSING DEALER / MECHANIC
 4. ☐ PUBLIC UTILITY EMPLOYEE
 5. ☐ PROPERTY OWNER

LICENSE # [] [] [] [] [] [] [] [] [] []

Hook-Up & Piping Relocation Maximum of 1 Hook-Up

☐ ☐ HOOK-UP: to public sewer by those cases where the connection is not regulated and inspected by the local sanitary district.

☐ ☐ HOOK-UP: to an existing subsurface wastewater disposal system

☐ ☐ PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.

Column 2 Type of Fixture

Number [] [] Hosebib / Sillcock
 [] [] Floor Drain
 [] [] Urinal
 [] [] Drinking Fountain
 [] [] Indirect Waste
 [] [] Water Treatment Softener, Filter, Etc.
 [] [] Grease / Oil Separator
 [] [] Roof Drain
 [] [] Bidet
 [] [] Other: _____
 [] [] Fixtures (Subtotal) Column 2

Column 1 Type of Fixture

Number [] [] Bathtub (and Shower)
 [] [] Shower (separate)
 [] [] Sink
 [] [] Wash Basin
 [] [] Water Closet (Toilet)
 [] [] Clothes Washer
 [] [] Dish Washer
 [] [] Garbage Disposal
 [] [] Laundry Tub
 [] [] Water Heater
 [] [] 3 Fixtures (Subtotal) Column 1
 [] [] Fixtures (Subtotal) Column 2

OR

☐ TRANSFER FEE (\$10.00)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

☐ Owner ☒ Town Copy ☐ State Copy

TOTAL FIXTURES

Fixture Fee

Transfer Fee

Hook-Up & Relocation Fee

140.00 PERMIT FEE (TOTAL)